



TOWN OF ERIE BUILDING INSPECTION DIVISION

645 HOLBROOK STREET/P.O. BOX 750 ERIE, CO 80516 303.926.2780 FAX 303.926.2704

APPLICATION FOR CONTRACTOR LICENSING

General Information

Company Name _____

Address _____ City/State _____ Zip _____

Phone _____ Fax _____

Contact Person or License Holder _____

Contact E-Mail _____

*Insurance Information

Insurance Company _____

Name of Agent _____ Phone _____

Policy No. _____ Exp. Date _____

(* Please provide a copy with completed submittal.)

License Information

Type of Business: _____

Type of License Requested (circle one): Class A Class B Class C Mechanical Concrete & Form
Excavator House/Building Mover Electrical Plumbing

*Electrical State Contractor License # _____ *Electrical Master License # _____

*Plumbing State Contractor License # _____ *Plumbing Master License # _____

(* Please provide a copy with completed submittal.)

Contractor Responsibility

I understand that all contractors conducting work within the Town of Erie are required to obtain a Town of Erie Contractor's License and obtain all necessary building permits in accordance with Ordinance No. 486 and No. 639.

I hereby certify that the statements above constitute a part of this application and are true and correct to the best of my knowledge.

Applicant _____ Date _____

For Office Use Only:

LICENSE STATUS ☐ Approved ☐ Denied Approved by _____ Date _____

License Type _____ License Number Issued _____ Payment Amount _____

Payment Method ☐ Cash ☐ Check Check No. _____